2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723807

FILED Jan 06, 2008 Secretary of State

Entity Name: HUMANE SOCIETY OF GREATER MIAMI, DADE COUNTY SOCIETY FOR PREVENTION OF CRUELTY

TO ANIMALS AND ADOPT A PET, INC.

Current Principal Place of Business: New Principal Place of Business:

16101 W. DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33160

Current Mailing Address: New Mailing Address:

16101 W. DIXIE HIGHWAY NORTH MIAMI BEACH, FL 33160

FEI Number: 59-0711176 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARQUEZ, EMILY 16101 W DIXIF HWY NORTH MIAMI BEACH, FL 33160 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Name:

Address:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete

(X) Change () Addition RUBIN, ALAN Name:

MELLO, RICHARD M 21300 SW 246TH STREET Address: 1 SE 3RD AVENUE, 28TH FLOOR

City-St-Zip: MIAMI, FL 33031 City-St-Zip: MIAMI, FL 33131

Title: EC Title: EC (X) Change () Addition () Delete

LEVIN, ROYE Name: HUDSON, ROBERT Name:

Address: 720 PALM BAY LANE, #95 Address: 500 SOUTH DIXIE HIGHWAY City-St-Zip: MIAMI, FL 33138 City-St-Zip: CORAL GABLES, FL 33146

Title: EC () Delete Title: EC (X) Change () Addition

BLUM, SAMUEL BLUM, SAMUEL Name: Name:

2843 BAYSHORE DRIVE, PH 2F Address: Address: 2666 TIGERTAIL AVENUE #106 City-St-Zip: MIAMI, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133

Title: EC () Delete Title: EC (X) Change () Addition

Name: SHARPE, THOMAS R Name: LOPEZ, MARGARET Address: 3800 NW 2ND STREET Address: 3275 NW 87TH AVENUE City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33172

Title: () Delete Title: () Change (X) Addition

HEADLEY, MICHELE Name: Name: 198 OCEAN BLVD Address: Address: City-St-Zip: City-St-Zip: GOLDEN BEACH, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELEANOR J LLOYD DIR 01/06/2008